

✓	Required <b>Certifications</b> signed and submitted to Local HUD Field Office	
✓	<i>Certification of Compliance with PHA Plan and Related Regulations</i> Form HUD-50077	X
	If applying for Capital Funds: Form HUD-50070, <i>Drug-Free Workplace</i> Form HUD-50071, <i>Payments to Influence Federal Transactions</i> Forms SF-LLL and SF-LLLa, <i>Lobbying Activities</i>	X
	<b>RAB</b> comments received and addressed	X

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: _Potter County Housing Authority: <b>Potter County Housing Authority</b> PHA Code: <b>PA 077</b> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY) <b>6/2010</b>												
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <b>0</b> Number of HCV units: <b>295</b>												
<b>3.0</b>	<b>Submission Type</b> X 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <tr> <th>PH</th> <th>HCV</th> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>	PH	HCV						
PH	HCV												
	PHA 1:												
	PHA 2:												
	PHA 3:												
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.												
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <b>The mission of Potter County Housing Authority is built on the guidance of the Department of Housing and Urban Development, to promote and sustain adequate and affordable housing, economic opportunity and a safe, decent and sanitary environment free from discrimination for all.</b>												

5.2	<p><b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p><b>PHA Goals:</b></p> <p><b>Increase assisted housing choices:</b></p> <p>Encourage HCV site-based waiting lists, this is being considered, tenants are asked at the time of application where they want to reside; Marcellus Shale impact on Housing affordability; Increase the housing resources available for persons with disabilities.</p> <ul style="list-style-type: none"> <li>• The Housing Authority works cooperatively with local social service providers to ensure that individuals with disabilities receive necessary services to increase their success at independent living.</li> <li>• 504 renovations and reasonable accommodation requests in Housing units make accessible units available to individuals with physical limitations.</li> </ul> <p><b>Provide an improved living environment:</b></p> <p>Implement measures to deconcentrate poverty by encouraging higher income housing households into lower income developments.</p> <ul style="list-style-type: none"> <li>• Housing units are occupied by all income levels that are eligible for housing.</li> <li>• Implement measures to promote income mixing in housing by assuring access for lower income families into higher income developments.</li> <li>• All applicants have access to all developments no matter how low their income.</li> </ul> <p><b>Promote self-sufficiency and asset development of assisted households:</b></p> <p>Provide or attract supportive services to increase independence for the elderly or families with disabilities.</p> <ul style="list-style-type: none"> <li>• We work cooperatively with all agencies</li> <li>• Career link has made programs available to our residents regarding job readiness and resume writing.</li> <li>• Services are posted in administration office and at family complexes.</li> </ul> <p><b>Ensure equal opportunity and affirmatively further fair housing objectives:</b></p> <p>Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability.</p> <p>Continue existing policy of equal housing opportunity for all eligible households.</p>
6.0	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p><b>Section 8 Administrative Plan</b></p> <p><b>By-laws</b></p> <p><b>Addendum to Choice Voucher Housing Lease</b></p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p><b>Main Administrative Office located at 22 East Seventh Street, Coudersport PA 16915</b></p>
7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> Include statements related to these programs as applicable.</p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b></p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>



9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p><b>The Potter County Housing Authority currently has a total of 161 individuals on the Section 8 New Construction and HCV Housing waiting list. The majority of the waiting list at this time is families with children (54%) one hundred percent (100%) of the waiting list falls into the extremely low income category.</b></p> <p><b>At this time, Potter County lacks an adequate stock of affordable housing that meets housing quality standards under the Section 8 Program. All housing units have a waiting list. The housing staff has noted a need for quality affordable housing in the townships surrounding the Coudersport area.</b></p> <p><b>The Housing Authority recently rehabilitation work, however, we do not have individuals who require an accessible unit at this time. Accessibility has not been an issue for the Section 8 Program.</b></p> <p><b>The Authority's need at this time is additional housing and additional Section 8 HCV Funding as we are currently at our funding maximum and have been spending down our net restricted asset balance to serve more individuals, in addition affordable housing with the influence of Marcellus Shale gas is increasing demand for units.</b></p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p><b>The Authority is always looking for landlords with quality housing who are interested in participating with the Section 8 program. Last year the Authority sent landlord information throughout the County in an effort to educate current landlords and recruit new ones;</b></p> <p><b>In an effort to serve more individuals, the Authority is partnering with Human Services for McKinney-Vento Shelter+Care funding and the non-elderly/disabled vouchers.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p><b>The Authority works closely with local social service agencies to ensure that the needs of elderly and disabled are being met so that they can maintain their housing.</b></p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>The Potter County Housing Authority defines "significant amendment" and "substantial deviation/modification" as any change to our plans that requires prior HUD approval.</b></p>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>



**PHA Certifications of Compliance  
with PHA Plans and Related  
Regulations**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:  
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ☒ 5-Year and/or ☒ Annual PHA Plan for the PHA fiscal year beginning 7/1/2010, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.



13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Potter County Housing Authority

PA077

PHA Name

PHA Number/HA Code

X 5-Year PHA Plan for Fiscal Years 2010 - 2015

X Annual PHA Plan for Fiscal Years 2010 - 2011

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Title

David J. Buckler

Board Chairman

Signature

Date

*David J. Buckler*

*6/20/11*



**Civil Rights Certification**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011

**Civil Rights Certification****Annual Certification and Board Resolution**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Potter County Housing Authority

PA 077

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

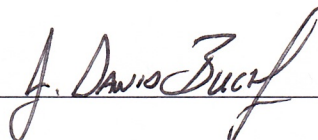
Name of Authorized Official

David J. Buckler

Title

Board Chairman

Signature



Date

6/20/11

# Certification for a Drug-Free Workplace

U.S. Department of Housing  
and Urban Development

Applicant Name

Potter County Housing Authority

Program/Activity Receiving Federal Grant Funding

Housing Choice Vouchers, CDBG entitlement, HOME

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

**2. Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Potter County Housing Authority main office  
22 East Seventh Street  
Coudersport, PA 16915

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

David J. Buckler

Title

Board Chairman

Signature

X

Date

6/28/11



# Potter Leader-Enterprise

## Proof of Publication in the Potter Leader-Enterprise

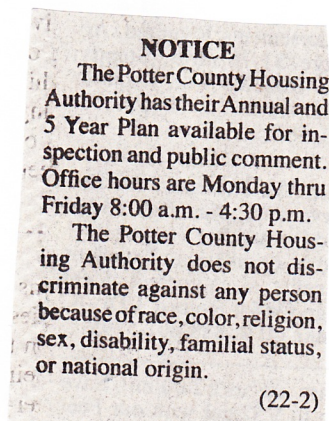
(Under Act. No. 587. Approved May 16, 1929)

State of Pennsylvania }  
County of Potter } ss:

Brent W. Addleman, Editor of the Potter Leader-Enterprise of the County and State aforesaid, being duly sworn, deposes and says that the Potter Leader-Enterprise, a legal periodical published in the Borough of Coudersport, County and State aforesaid, was established in September 1987 since which date the Potter Leader-Enterprise has been regularly issued in said County, and that the printed notice or publication attached hereto is exactly the same as was printed and published in the regular editions and issues of the said Potter Leader-Enterprise on the following dates, vis:

May 25, 2011, June 1, 2011

Affiant further deposes that he is the Editor of the Potter Leader-Enterprise, a legal periodical of general circulation, to verify the foregoing statement under oath, and that neither the affiant nor the Potter Leader-Enterprise is interested in the subject matter of the aforesaid notice or advertisement and that all allegations in the foregoing statements as to time, place and character of publication are true.



B. W. Addleman  
Editor, Potter Leader-Enterprise

Sworn and subscribed before me this 2nd day of June, 2011

Jane E. Hugill

COMMONWEALTH OF PENNSYLVANIA

Notarial Seal

Jane E. Hugill, Notary Public

Coudersport Boro, Potter County

My Commission Expires Apr. 5, 2012

My commission expires

### TO POTTER LEADER-ENTERPRISE, COUDERSPORT, PA

For publishing the notice or publication attached hereto on the above stated dates..... \$80.00  
Probating same..... 4.00  
Total..... \$84.00  
The Potter Leader-Enterprise, a legal periodical hereby acknowledges receipt of the aforesaid notice and publication costs and certifies the same have been duly paid.

THE POTTER LEADER-ENTERPRISE

BY: \_\_\_\_\_

**POTTER COUNTY HOUSING AUTHORITY**

**PA077**

**STREAMLINED-ANNUAL PLAN  
FOR FISCAL YEAR 2010**

**STREAMLINED 5-YEAR PLAN  
FOR FISCAL YEAR 2010-2015**



## Submit Plan Checklist – PHA Plans

How do you know if your plan is complete? Use the following checklist to ensure the PHA Plan is complete and ready for submission:

<i>Place an "X" or ✓ in this column for items completed</i>		<b><i>Standard and Troubled 5-Year/ Annual 50075</i></b>	<b><i>High Performers, Section 8 Only  50075</i></b>
✓	<b>1.0 PHA Information</b>	X	X
✓	<b>C. 5-Year Plan completed (when due)</b>	X	X
✓	<b>2.0 Inventory</b>	X	X
✓	<b>3.0 Submission Type</b>	X	X
	<b>4.0 PHA Consortia</b>	Optional	Optional
✓	<b>5.1 Mission (when 5-Year Plan due)</b>	X	X
✓	<b>5.2 Goals and Objectives (when 5- Year Plan due)</b>	X	X
✓	<b>6.0 PHA Plan Update</b>	X	X
	<b>7.0</b>		
	HOPE VI	If applicable	If applicable
	Mixed Finance Mod/Development	If applicable	If applicable
	Demo/Disposition	If applicable	If applicable
	Mandatory or Voluntary Conversion	If applicable	If applicable
	Homeownership Programs	If applicable	If applicable
	Project-based Vouchers	If applicable	If applicable
	<b>8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report</b>	If applicable	If applicable
	<b>8.2 Capital Fund Five-Year Action Plan</b>	If applicable	If applicable
	<b>8.3 Capital Fund Financing Program (CFFP)</b>	If applicable	If applicable
✓	<b>9.0 Housing Needs</b>	X	5-Year Plan Only
✓	<b>9.1 Strategy for Addressing Housing Needs</b>	X	5-Year Plan Only
✓	<b>10.0 Additional Information</b>	X	5-Year Plan only
✓	<b>11.0 Required Submissions, if applicable</b>	X	